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APPLICANTS

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** CONTINUING DATA

none** nm

** FOREIGN APPLICATIONS

none** nm

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

** 03/15/2002

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no	STATE OR COUNTRY KY	SHEETS DRAWING 2	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 4
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no Verified and Acknowledged <i>[Signature]</i> Examiner's Signature	Met after Allowance <i>[Signature]</i> Initials			

ADDRESS

TAYLOR & AUST, P.C.
 12029 E. Washington Street
 Indianapolis, IN
 46229

TITLE

Home network printer adapter

FILING FEE RECEIVED 1152	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____
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